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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/413,887	10/06/99	3738	\$1,240.00	35871/MAK/M4	4	25	9

CHRISTIE PARKER & HALE LLP
PO BOX 7068
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M479:
35871
CASE # ACTION

REMINDER DUE DATE

DEADLINE

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) JOEL QUAID, SANTA BARBARA, CA.

CONTINUING DATA AS CLAIMED BY APPLICANT-

THIS APPLN IS A RE OF	08/570,802	12/12/95	PAT 5,674,285
WHICH IS A CON OF	07/993,463	12/15/92	ABN
WHICH IS A CON OF	07/634,430	12/27/90	ABN
WHICH IS A CON OF	07/559,973	07/27/90	PAT 5,007,929
WHICH IS A CON OF	07/361,786	05/30/89	ABN
WHICH IS A CON OF	06/927,272	11/04/86	ABN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/17/99

TITLE

MAMMARY IMPLANT HAVING SHELL WITH UNITARY ROUGH-TEXTURED OUTER LAYER

PRELIMINARY CLASS: 623

DATA ENTRY BY: BATES, DIANE

TEAM: 03 DATE: 11/17/99



(See reverse for new important information)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: INAMED CORPORATIONApplication No./Patent No.: 5,674,285Filed/Issue Date: December 12, 1995Entitled: MAMMARY IMPLANT HAVING SHELL WITH UNITARY ROUGH TEXTURED OUTER LAYERINAMED CORPORATION, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. [] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. [x] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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[x] Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

November 6, 2000
Date

David E. Bamberger, Esq.
Typed or printed name



Senior Vice President & General Counsel
Title

Please type a plus sign (+) inside this box →

PTO/SB/82 (11/96)

Approved for use through 6/30/99. OMB 0651-0035

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	5,674,285
Filing Date	December 12, 1995
First Named Inventor	Joel Quaid
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

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Please change the correspondence address for the above-identified application to:

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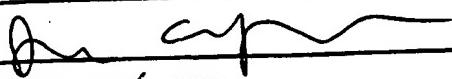
<input checked="" type="checkbox"/> Firm or Individual Name	Christopher E. Chalsen, Esq.			
Address	Milbank, Tweed, Hadley & McCloy			
Address	1 Chase Manhattan Plaza			
City	New York			
Country	US	State	NY	ZIP
Telephone	(212) 530-5380	Fax		

I am the:

Applicant.

Assignee of record of the entire interest
Certificate under 37CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name	David E. Bamberger, Esq., Senior Vice President & General Counsel	
Signature		
Date	November 6, 2000	

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<input checked="" type="checkbox"/> Firm or Individual Name	Christopher E. Chalsen			
Address	Milbank, Tweed, Hadley & McCloy LLP			
Address	1 Chase Manhattan Plaza			
City	New York	State	NY	ZIP
Country	US			
Telephone	(212) 530-5380	Fax		

in the following listed application(s) for which the Issue Fee has been paid or patent(s).

PATENT NUMBER (If known)	APPLICATION NUMBER
B1 4,889,744 B1 5,007,929 5,674,285	09/413,887

(check one)

Applicant/Inventor

Assignee of record of the entire interest

Attorney or agent of record _____

(Reg. No.)

Assignment recorded at Reel _____ Fram _____


Signature

David E. Bamberger, Esq.

Typed or printed name

Customer's telephone number

November 10, 2000
Date